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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
OR

Attorney Docket Number	005092.00029
First Named Inventor	Strand, David
<i>COMPLETE IF KNOWN</i>	
Application Number	10/033,315
Filing Date	December 27, 2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: _____

Microfluidic Substrate Assembly & Method for Making Same

the specification of which

(Title of the Invention)

is attached hereto

13
OR

was filed on (MM/DD/YYYY) December 27, 2001 as United States Application Number or PCT International

Application Number 10/033,315 and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/239,010	10/06/2000	<input checked="" type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/239,063	10/06/2000	
60/238,805	10/06/2000	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
PCT/US01/31333	October 5, 2001	

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 22910 → Place Customer Number Bar Code Label here
 Registered practitioner(s) name/registration number listed below

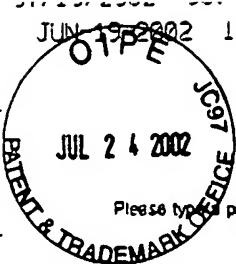
Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.
Direct all correspondence to: Customer Number or Bar Code Label 22910 OR Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
David	Strand						
Inventor's Signature							
Date	6/29/02						
Residence: City	Sherborn	State	MA	Country	USA	Citizenship	USA
Post Office Address	16 Nason Hill Lane						
Post Office Address							
City	Sherborn	State	MA	ZIP	01770	Country	USA
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

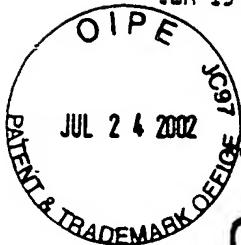
DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Joseph	Antoci						6/24/02
Inventor's Signature	<i>Joseph Antoci</i>						Date
Residence: City	Leominster	State	MA	Country	USA	Citizenship	USA
Post Office Address	101 Old Farm Road						
Post Office Address							
City	Leominster	State	MA	ZIP	01453	Country	USA
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Peter	Myers						
Inventor's Signature							Date
Residence: City	Bromborough, Wirral	State		Country	United Kingdom	Citizenship	United Kingdom
Post Office Address	19 Woodlca Close						
Post Office Address							
City	Bromborough, Wirral	State		ZIP	L626DL	Country	United Kingdom
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
David	Barrow						
Inventor's Signature							Date
Residence: City	Cardiff, Wales	State		Country	United Kingdom	Citizenship	United Kingdom
Post Office Address	61 Lake Road West, Roath Park						
Post Office Address							
City	Cardiff, Wales	State		ZIP	SA59DJ	Country	United Kingdom

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PTO/SB/RA (3-07)

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Joseph		Anisoori			
Inventor's Signature					Date
Residence: City	Leominster	State	MA	Country	USA
Post Office Address	10 Old Farm Road				
Post Office Address					
City	Leominster	State	MA	ZIP	01453
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Peter		Myers			
Inventor's Signature	<i>Peter Myers</i>				Date
Residence: City	Bromborough, Wirral	State		Country	United Kingdom
Post Office Address	19 Woodlice Close				
Post Office Address					
City	Bromborough, Wirral	State		ZIP	L76 26D
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
David		Barrow			
Inventor's Signature					Date
Residence: City	Cardiff, Wales	State		Country	United Kingdom
Post Office Address	61 Lake Road West, Roath Park				
Post Office Address					
City	Cardiff, Wales	State		ZIP	SA2 0DJ

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>					
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Joseph		Antoci					
Inventor's Signature					Date		
Residence: City	Leominster	State	MA	Country	USA	Citizenship	USA
Post Office Address	101 Old Farm Road						
Post Office Address							
City	Leominster	State	MA	ZIP	01453	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Peter		Myers					
Inventor's Signature					Date		
Residence: City	Bromborough, Wirral	State		Country	United Kingdom	Citizenship	United Kingdom
Post Office Address	19 W'Jordan Close						
Post Office Address							
City	Bromborough, Wirral	State		ZIP	L676DL	Country	United Kingdom
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
David		Barrow					
Inventor's Signature	<i>David Barrow</i>				Date	6/21/02	
Residence: City	Cardiff, Wales	State		Country	United Kingdom	Citizenship	United Kingdom
Post Office Address	51 Lake Road West, Roath Park						
Post Office Address							
City	Cardiff, Wales	State		ZIP	CA59DJ	Country	United Kingdom

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned Inventor

Given Name (first and middle [if any])

Family Name or Surname

Joseph

Cefai

Inventor's Signature

Date

30/6/02

Residence: City

Swansea, Wales

State

Country

United Kingdom

Citizenship

United Kingdom

Post Office Address

14 Quarry Road

Post Office Address

Swansea, Wales

State

ZIP

SA59DJ

Country

United Kingdom

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned Inventor

Given Name (first and middle [if any])

Family Name or Surname

Tim

Myers

Inventor's Signature

Date

Residence: City

Wirral

State

Country

United Kingdom

Citizenship

United Kingdom

Post Office Address

1, Hyacinth Grove

Post Office Address

City

Wirral

State

ZIP

CH46 1SW

Country

United Kingdom

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned Inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 3	
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Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Joseph		Catali			
Inventor's Signature				Date	
Residence: City	Swansea, Wales	State	Country	United Kingdom	Citizenship
Post Office Address	14 Oakley Road				
City	Swansea, Wales	State	ZIP	(SA590)	Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Tim		Myers			
Inventor's Signature				Date	
Residence: City	Wivel	State	Country	United Kingdom	Citizenship
Post Office Address	1, Hyacinth Grove				
City	Wivel	State	ZIP	CH46 1SW	Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State	Country		Citizenship
Post Office Address					
City		State	ZIP		Country

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applications:

Additional provisional applications:

Application Number	Filing Date (MM/DD/YYYY)
60/238,390	10/06/2000

Additional U.S. applications:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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